

Recipient Committee Campaign Statement Cover Page

Date Stamp	CALIFORNIA FORM 460

Date of election if applicable:
(Month, Day, Year)
11/06/2018

Statement covers period
from 07/01/2018
through 09/22/2018

For Official Use Only
27 SEP 2018 PM 3:53
CITY CLERK'S OFFICE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4

- ☒ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
- ☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
☐ Primarily Formed Candidate/Officeholder Committee
☐ Political Party/Central Committee

2. Type of Statement:

- ☒ Preelection Statement
☐ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain Below)

- ☐ Quarterly Statement
☐ Special Odd-Year Report

3. Committee Information

I.D. NUMBER 1407086

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Gloria Soto for Santa Maria City Council District 3 2018

Treasurer(s)

NAME OF TREASURER

Monica Intaglietta

MAILING ADDRESS

226 East Canon Perdido Street #D

CITY

CODE/PHONE

Santa Barbara, CA 93101

NAME OF ASSISTANT TREASURER, IF ANY

Juan Pablo Anguiano

MAILING ADDRESS

206 North Curryer Street

CITY

CODE/PHONE

Santa Maria, CA 93458

OPTIONAL: FAX / E-MAIL ADDRESS

monica@cicsb.com

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

9/27/18

DATE

Executed on

9/27/18

DATE

Executed on

DATE

Executed on

DATE

By  Signature of Treasurer or Assistant Treasurer

By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee
Campaign Statement
Cover Page - Part 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE			
Gloria Soto			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)			
City Council Member	LOCATION: City of Santa	DISTRICT NO. 3	
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
818 W Dante Drive	Santa Maria, CA	93458	

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy*

COMMITTEE NAME	I.D. NUMBER		
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA
COMMITTEE NAME	I.D. NUMBER		
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE			
BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE	
Identify the controlling officeholder, candidate, or state measure proponent, if any.			
NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT			
OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY		

7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

<p>SEE INSTRUCTIONS ON REVERSE</p> <p>NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018</p>	<p>Statement covers period from 07/01/2018 through 09/22/2018</p> <p>Page 3 of 31</p> <p>CALIFORNIA 460 FORM</p> <p>I.D. NUMBER 1407086</p>
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Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3 \$ 17,154.00	\$ 17,154.00
2. Loans Received	Schedule B, Line 3 500.00	500.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2 \$ 17,654.00	\$ 17,654.00
4. Nonmonetary Contributions	Schedule C, Line 3 .00	.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4 \$ 17,654.00	\$ 17,654.00

Expenditures Made

6. Payments Made	Schedule E, Line 4 \$ 8,852.86	\$ 8,852.86
7. Loans Made	Schedule H, Line 3 .00	.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7 \$ 8,852.86	\$ 8,852.86
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 .00	.00
10. Nonmonetary Adjustment	Schedule C, Line 3 .00	.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10 \$ 8,852.86	\$ 8,852.86

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16 \$.00	\$.00
13. Cash Receipts	Column A, Line 3 above 17,654.00	17,654.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4 25.10	25.10
15. Cash Payments	Column A, Line 6 above 8,852.86	8,852.86
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 \$ 8,826.24	\$ 8,826.24
<i>If this is a termination statement, Line 16 must be zero.</i>		
17. LOAN GUARANTEES RECEIVED	Schedule B, Line 2 \$.00	.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse \$.00	.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above \$ 500.00	\$ 500.00

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$.00	\$.00
21. Expenditures Made	\$.00	\$.00

Expenditures Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
	\$
	\$
	\$
	\$
	\$

*Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>07/01/2018</u> through <u>09/22/2018</u>		CALIFORNIA 460 FORM
Page <u>4</u> of <u>31</u>		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018		I.D. NUMBER 1407086

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/08/2018	Juan Pablo Anguiano 206 North Curyer Street Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Direct Billing Administrator Industrial Medical Group of Santa	100.00	100.00	
07/17/2018	Virginia Souza 2252 Fallen Leaf Drive Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investment advisor Morgan Stanley	250.00	250.00	
07/18/2018	Ken Saxon 1857 E Las Tunas Rd Santa Barbara, CA 93103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Leading from Within	500.00	500.00	
07/19/2018	Christine Lyon 1911 Coyote Cir Santa Barbara, CA 93108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	250.00	250.00	
07/23/2018	Diana Perez 351 Siler Ln Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Allan Hancock College	250.00	250.00	

SUBTOTAL \$ 1,350.00

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

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NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

I.D. NUMBER

1407086

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/23/2018	Raymond Segura 912 South McClelland Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	250.00	250.00	
07/26/2018	Willie Galvan 702 East El Camino Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	100.00	100.00	
07/26/2018	High Sky Farm 1050 East Highway 246 Solvang, CA 93463	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	
07/31/2018	Kathryn Adams 705 E. Borges Drive Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Allan Hancock College Professor	200.00	200.00	
07/31/2018	David Dennis 416 East Hermosa Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	100.00	100.00	

SUBTOTAL \$ 900.00

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule A

Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

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I.D. NUMBER

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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/31/2018	Helen Galvan 702 E El Camino St Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	100.00	100.00	
07/31/2018	Renner Wunderlich 3099 Hidden Valley Ln Santa Barbara, CA 93108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Clinical Social Worker Department of Veterans Affairs	300.00	300.00	
08/01/2018	Elizabeth Cortez 910 Nartatez Ct Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Program Coordinator Santa Maria High School	250.00	250.00	
08/08/2018	Anna DiStefano 1113 Plaza Del Monte Santa Barbara, CA 93101	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor Fielding Graduate University	250.00	250.00	
08/08/2018	Carlos Lopez 1383 Graham Street Simi Valley, CA 93065	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General construction Carlos Lopez	200.00	200.00	

SUBTOTAL \$ 1,100.00

Schedule A Monetary Contributions Received

Amounts may be rounded
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/08/2018	Gloria Soto 818 W Dante Drive Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Regional Development Coordinator Planned Parenthood	25.00	525.00	
08/08/2018	Elsa Velasco 1556 Lark St Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Emergency Care Technician Cottage Health Systems	100.00	100.00	
08/08/2018	Alma Wilson 617 East Mariposa Way Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Program Manager County of Santa Barbara	100.00	100.00	
08/09/2018	Gary Clark 1835 Loma St Santa Barbara, CA 93103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director of Capacity Building The Fund for Santa Barbara	250.00	250.00	
08/09/2018	Samuel Duarte 322 South Ranch St Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Thrive Project Coordinator The Fund for Santa Barbara	150.00	150.00	

SUBTOTAL \$ 625.00

Schedule A

Monetary Contributions Received

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1407086

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/09/2018	Jack Gavin Consulting 3501 Telephone Road Santa Maria, CA 93454	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Senior Business and Management King County	100.00	100.00	
08/10/2018	Cristina Gonzalez 2400 4th Avenue #605 Seattle, WA 98121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	
08/16/2018	Jeanne Sparks 2242 Fallen Leaf Drive Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Project Director Central Coast Dream Team	100.00	100.00	
08/18/2018	Kalleen Corley 571 Security Ct Oceanside, CA 93445	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	100.00	100.00	
08/18/2018	Richard Flacks 1603 Garden Street Santa Barbara, CA 93101	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	100.00	100.00	

SUBTOTAL \$ 650.00

Schedule A Monetary Contributions Received

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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/20/2018	Patricia Solorio 224 Linda Drive Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director of Grant Making The Fund for Santa Barbara	200.00	200.00	
08/24/2018	Feliciano Aguilar 313 East Las Flores Way Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Activist Association of Two-Way and Dual	100.00	100.00	
08/26/2018	Jenny Rude 1402 Bluebird Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	100.00	100.00	
08/27/2018	Suzanne Valery 1734 Tierra Nueva Lane Oceano, CA 93445	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director of Institutional Grants Allan Hancock College	150.00	150.00	
08/29/2018	Kathryn Adams 705 E. Borges Drive Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Allan Hancock College Professor	100.00	300.00	

SUBTOTAL \$ 650.00

Schedule A Monetary Contributions Received

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08/29/2018	Daisy Basulto 213 West Bunny Avenue Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Organizer Future Leaders of America	100.00	100.00	
08/29/2018	Luz Maria Cabral 1855 N Western Ave Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	129.00	129.00	
08/29/2018	Tania Cabral 1855 N Western Ave Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager Ultra, Inc	129.00	129.00	
08/29/2018	David Dennis 416 East Hermosa Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	500.00	629.00	
08/29/2018	David Dennis 416 East Hermosa Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	29.00	629.00	

SUBTOTAL \$

887.00

Schedule A Monetary Contributions Received

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08/29/2018	Katie Novo 517 East Taylor Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sr. Graphic Designer Primus Group	60.00	110.00	
08/29/2018	Karla Ochoa 413 West Hermosa Street Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Psychologist SMBSD	400.00	400.00	
08/29/2018	Raymond Segura 912 South McClelland Street Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	60.00	310.00	
08/29/2018	Elisa Velasco 1556 Lark St Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Emergency Care Technician Cottage Health Systems	99.00	199.00	
08/30/2018	David Parker 831 San Ysidro Lane Nipomo, CA 93444	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	100.00	100.00	

SUBTOTAL \$ 719.00

Schedule A Monetary Contributions Received

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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/30/2018	The Pentaverite, Inc. 633 East Main Street Ventura, CA 93001	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		460.00	860.00	
08/30/2018	The Pentaverite, Inc. 633 East Main Street Ventura, CA 93001	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		400.00	860.00	
08/31/2018	Aj Valenzuela 726 Flathead River Street Oxnard, CA 93036	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Longshoreman Pacific Maritime Association	50.00	100.00	
09/01/2018	Maricela Morales 1039 W. Creston St Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Director Cause	200.00	200.00	
09/05/2018	Kenneth Hough ?242 Fallen Leaf Drive Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	250.00	250.00	

SUBTOTAL \$ 1,360.00

Schedule A

Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

CALIFORNIA 460
FORM

Statement covers period

from 07/01/2018

through 09/22/2018

Page 13 of 31

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

I.D. NUMBER

1407086

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/07/2018	Equity Reach 722 East Main Street #112 Santa Maria, CA 93454	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
09/07/2018	Carole Gilles 2611 Terrace Drive Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	250.00	250.00	
09/07/2018	Joan Hartmann 1220 Poppy Valley Rd Buellton, CA 93427	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Supervisor County of Santa Barbara	250.00	250.00	
09/07/2018	Planned Parenthood Action Fund 518 Garden Street Santa Barbara, CA 93101 ID: 1278950	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
09/11/2018	Martha Claus 245 El Dorado Way Pismo Beach, CA 93449	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	500.00	500.00	

SUBTOTAL \$ 2,500.00

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from 07/01/2018
through 09/22/2018

**CALIFORNIA 460
FORM**

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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

I.D. NUMBER

1407086

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/11/2018	Joseph Visci 245 El Dorado Way Pismo Beach, CA 93449	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	500.00	500.00	
09/12/2018	Nancy Johnson 149 Palm Court Drive Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	300.00	300.00	
09/14/2018	Juanita Nichols 2580 Bridle Trails Ln Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	150.00	150.00	
09/14/2018	Ted Rhodes 180 Ocean View Ave Carpinteria, CA 93013	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Photographer Ted Rhodes	500.00	500.00	
09/17/2018	James Kynaco for Goleta City Council 226 East Canon Perdido Street #D Santa Barbara, CA 93101 ID: 1401816	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	

SUBTOTAL \$ 1,700.00

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule A

Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from 07/01/2018
through 09/22/2018CALIFORNIA
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

I.D. NUMBER

1407086

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/17/2018	Abraham Melendrez 1803 Citrus Court Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Organizer Cause	100.00	100.00	
09/17/2018	Julie Mickelberry 5118 Evalita Ln Santa Barbara, CA 93111	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President of Community Planned Parenthood	150.00	150.00	
09/17/2018	Monique Limon for Assembly 1787 Tribute Road #K Sacramento, CA 95815 ID: 1392511	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	
09/19/2018	Anne Schowe 930 Monte Drive Santa Barbara, CA 93110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	500.00	500.00	
09/21/2018	Katie Davis 1144 North Fairview Avenue Goleta, CA 93117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not employed Not employed	250.00	250.00	

SUBTOTAL \$ 1,250.00

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

**CALIFORNIA 460
FORM**

Statement covers period
from 07/01/2018
through 09/22/2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

I.D. NUMBER

1407086

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/21/2018	Tania Israel 1011 Mission Ridge Road Santa Barbara, CA 93103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor UC Santa Barbara	100.00	100.00	
	Hannah-Beth Jackson 744 Woodland Drive Santa Barbara, CA 93108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	State Senator State of CA	100.00	100.00	
09/21/2018	Jonathan Abboud for SBCC Trustee 226 East Canon Perdido Street #D Santa Barbara, CA 93101 ID: 1408077	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	
	Plumbers And Steamfitters Local Union #114 93 Thomas Road Buellton, CA 93427 ID: 890465	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
09/22/2018	Yesenia Decasaus 521 Inger Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Regional Coordinator UDW	100.00	100.00	

SUBTOTAL \$ 1,050.00

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

CALIFORNIA
FORM 460

Statement covers period

from 07/01/2018

through 09/22/2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

I.D. NUMBER

1407086

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/22/2018	Samuel Duarte 322 South Ranch St Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Thrive Project Coordinator The Fund for Santa Barbara	50.00	200.00	
09/22/2018	Lucas Zucker 139 Wall St. #G Ventura, CA 93001	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Policy and Communications Director Cause	100.00	100.00	

Schedule A Summary

1. Amount received this period - itemized monetary contributions.

(Include all Schedule A subtotals.) \$ 14,891.00

2. Amount received this period - unitemized monetary contributions of less than \$100

\$ 2,263.00

3. Total monetary contributions received this period.

(add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL \$ 17,154.00

SUBTOTAL \$ 150.00

* Contributor Codes

IND - Individual

COM - Recipient Committee

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule B - Part 1 Loans Received

Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period from <u>07/01/2018</u> through <u>09/22/2018</u>		CALIFORNIA 460 FORM	
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SEE INSTRUCTIONS ON REVERSE		NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018		I.D. NUMBER 1407086				
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD **	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Gloria Soto 818 W Dante Drive Santa Maria CA 93458	Planned Parenthood Regional Development	\$.00	\$ 500.00	<input type="checkbox"/> PAID \$.00 <input type="checkbox"/> FORGIVEN \$.00	\$ 500.00	0.00 RATE	\$ 500.00	525.00 PER ELECTION**
		\$.00	\$ 500.00			\$.00	07/20/2018 DATE INCURRED	

* ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC

Schedule B Summary

- Loans received this period
(Total Column (b) plus unitemized loans of less than \$100.)
----- \$ 500.00
- Loans paid or forgiven this period
(Total Column (c) plus loans under \$100 paid or forgiven)
(Include loans paid by a third party that are also itemized on Schedule A.)
----- \$.00
- Net change this period. (Subtract Line 2 from Line 1.)
Enter the net here and on the Summary Page, Column A, Line 2
----- **NET \$ 500.00**
(May be a negative number)

* Contributor Codes IND - Individual COM - Recipient Committee OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee

SUBTOTALS \$ 500.00 \$ 0.00 \$ 500.00 \$.00

*Amounts forgiven or paid by another party also must be reported on Schedule A
** If required.

(Enter (e) on
Schedule E, Line 3)
FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule B - Part 2 Loans Received

Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from <u>07/01/2018</u> through <u>09/22/2018</u>		CALIFORNIA 460 FORM
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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Gloria Soto for Santa Maria City Council District 3 2018

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE 		CALENDAR DATE _____ PER ELECTION (IF REQUIRED)	

SUBTOTAL \$	Enter on Summary Page, Line 17 only.
--------------------	---

Schedule C Nonmonetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>07/01/2018</u> through <u>09/22/2018</u>		CALIFORNIA 460 FORM	
Page <u>20</u> of <u>31</u>			

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER **Gloria Soto for Santa Maria City Council District 3 2018**

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 4 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Schedule C Summary

1. Amount received this period - itemized nonmonetary contributions.
(Include all Schedule C subtotals.) - - - - - \$.00

2. Amount received this period - unitemized nonmonetary contributions of less than \$100 - - - - - \$.00

3. Total nonmonetary contributions received this period.
(add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) - - - - - **TOTAL \$** .00

SUBTOTAL \$

* Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (other than PTY or SCC)
PTY - Political Party
SCC - Small Contributor Committee

Schedule D **Summary of Expenditures** **Supporting/Opposing Other** **Candidates, Measures, and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D

CALIFORNIA 460 FORM	
Statement covers period from <u>07/01/2018</u> through <u>09/22/2018</u>	Page <u>21</u> of <u>31</u>

NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018						I.D. NUMBER 1407086
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/29/2018	Planned Parenthood Action Fund DISTRICT #.	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		250.00	250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SCHEDULE D SUMMARY

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) \$ 250.00
- Unitemized contributions and independent expenditures made this period of under \$100 \$.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$ 250.00**

SUBTOTAL \$ 250.00	
---------------------------	--

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

SEE INSTRUCTIONS ON REVERSE		Statement covers period		CALIFORNIA 460 FORM	
NAME OF FILER		from 07/01/2018		Page 22 of 31	
Gloria Soto for Santa Maria City Council District 3 2018		through 09/22/2018		I.D. NUMBER 1407086	

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Brandt Media 6829 Sabado Tarde Road Goleta, CA 93117	CNS		425.00
Local Copies etc 1500 South Broadway Santa Maria, CA 93454	LIT		320.33
Union Graphics 9960 Glenoaks Boulevard #A Los Angeles, CA 91352	LIT		275.90
Integrated Solutions, Political 4142 Adams Avenue Suite 103-550 San Diego, CA 92116	OFC		167.74
SUBTOTAL \$			1,188.97

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

SEE INSTRUCTIONS ON REVERSE		Statement covers period from <u>07/01/2018</u> through <u>09/22/2018</u>		CALIFORNIA 460 FORM	
NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018		Page <u>23</u> of <u>31</u>		I.D. NUMBER 1407086	

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSE transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
City Of Santa Maria 110 South Pine Street Santa Maria, CA 93458	FIL		1,000.00
Alan Hancock College 800 South College Drive #H102 Santa Maria, CA 93454	LIT		347.11
Local Copies etc 1500 South Broadway Santa Maria, CA 93454	LIT		90.99
Super Cheap Signs 9200 Waterford Centre Boulevard Suite 100 Austin, TX 78758	CMP		382.34
SUBTOTAL \$			1,820.44

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period from 07/01/2018 through 09/22/2018		CALIFORNIA 460 FORM Page 24 of 31
I.D. NUMBER 1407086		

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Gloria Soto for Santa Maria City Council District 3 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Super Cheap Signs 9200 Waterford Centre Boulevard Suite 100 Austin, TX 78758	CMP		1,524.99
Brandt Media 6829 Sabado Tarde Road Goleta, CA 93117	CNS		400.00
Local Copies etc 1500 South Broadway Santa Maria, CA 93454	LIT		80.19
Planned Parenthood Action Fund 518 Garden Street Santa Barbara, CA 93101	CTB		250.00
ID: 1278950			

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 2,255.18

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>07/01/2018</u>		CALIFORNIA 460 FORM
through <u>09/22/2018</u>		
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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Gloria Soto for Santa Maria City Council District 3 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civ/c donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POI polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSE transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet e-mail) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Alan Hancock College 800 South College Drive #H102 Santa Maria, CA 93454	LIT		355.61
First Data 5565 Glenridge Connector NE Suite 2000 Atlanta, GA 30342	OFC		117.77
Integrated Solutions: Political 4142 Adams Avenue Suite 103-550 San Diego, CA 92116	OFC		100.00
Local Copies etc 1500 South Broadway Santa Maria, CA 93454	LIT		21.38
SUBTOTAL \$			594.76

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>07/01/2018</u> through <u>09/22/2018</u>		CALIFORNIA 460 FORM Page <u>26</u> of <u>31</u> I.D. NUMBER <u>1407086</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Vic Enterprises 124 North I Street Lompoc, CA 93436	CMP		239.04
Santa Maria Chamber of Commerce 614 South Broadway Santa Maria, CA 93454	CVC		170.00
C&J Consulting 226 East Canon Perdido Street Santa Barbara, CA 93101	CNS		1,375.00
Expedia 333 108th Avenue Northeast Bellevue, WA 98004	TRC	Lodging	220.61

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 2,004.65

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

CALIFORNIA
FORM 460

Statement covers period

from 07/01/2018

through 09/22/2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

I.D. NUMBER

1407086

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings

MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Super Cheap Signs 9200 Waterford Centre Boulevard Suite 100 Austin, TX 78758	CMP		370.60

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	8,234.60
2. Unitemized payments made this period of under \$100	\$	618.26
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	8,852.86
SUBTOTAL \$		370.60

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule F
Accrued Expenses (Unpaid Bills)

Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA 460
FORM

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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

I.D. NUMBER

1407086

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMIP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
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TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON LE)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD

SCHEDULE F SUMMARY

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) -- -- -- -- -- INCURRED TOTALS \$.00
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) -- -- -- -- -- PAID TOTALS \$.00
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) -- -- -- -- -- NET \$.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS \$ \$ \$ \$ \$ \$

Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period from <u>07/01/2018</u>		CALIFORNIA 460 FORM
through <u>09/22/2018</u>		
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2018

NAME OF AGENT OR INDEPENDENT CONTRACTOR

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information: technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

TOTAL * \$

** Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule H Loans Made to Others*

Amounts may be rounded
to whole dollars.

SCHEDULE H

Statement covers period from <u>07/01/2018</u> through <u>09/22/2018</u>		CALIFORNIA 460 FORM
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SEE INSTRUCTIONS ON REVERSE		I.D. NUMBER 1407086						
Gloria Soto for Santa Maria City Council District 3 2018								
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$	RATE % \$	\$	\$
		\$	\$		\$	DATE DUE	DATE INCURRED	CALENDAR YEAR PER ELECTION**

SUBTOTALS	\$	\$	\$	\$
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*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E

Schedule I Miscellaneous Increases to Cash

Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period from <u>07/01/2018</u> through <u>09/22/2018</u>		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2018

I.D. NUMBER 1407086

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Schedule I Summary

1. Itemized increases to cash this period.	\$ <u> </u>
2. Unitemized increases to cash of under \$100 this period.	\$ <u>25.10</u>
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$ <u> </u>
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$ <u>25.10</u>

SUBTOTAL \$